

MULTIPLE DEPENDENT
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

APPLICANT(S)

09/451286

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	INO.	OEP.	INO.	OEP.	INO.	OEP.
1	/					
2	/					
3	/					
4	/					
5	/					
6	/					
7	/					
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49						
50						
TOTAL INO.	3					
TOTAL OEP.	12					
TOTAL Fees	15	15000	15000	15000		

	INO.	OEP.	INO.	OEP.	INO.	OEP.
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TOTAL INO.						
TOTAL OEP.						
TOTAL Fees						